



STATE OF HAWAII
DEPARTMENT OF BUDGET & FINANCE
UNCLAIMED PROPERTY BRANCH
P.O. BOX 150
HONOLULU, HAWAII 96810-0150

CLAIM FOR RETURN OF PROPERTY PRESUMED ABANDONED
(See directions on reverse side)

1. Date _____ For Departmental Use Only

The undersigned, having an interest in property presumed abandoned, make(s) claim to said property now in the custody of the Director of Finance pursuant to Chapter 523A, Hawaii Revised Statutes.

Name of Original Owner _____ Address of Original Owner _____
Date of Birth _____ Social Security Number _____

2. CLAIM is hereby made to the Director of Finance for property presumed abandoned in the amount of \$ _____,
which was reported by _____ Name of Holder _____ Address of Holder _____
_____ and which consisted of _____ Type of Property _____

(Account Number or other identifying number, if applicable)

3. One or more of the following documents are submitted to establish ownership of property: (check documents submitted)
- When presented by —
- Original Owner or Claimant {
☐ Original passbook - if a bank account
☐ Original document - if a negotiable instrument (check, note, C/D, etc.)
☐ Stock certificate - if share(s) of stock
☐ Some other documentary evidence that will tend to connect the owner directly to the money or property claimed, such as a cancelled check or letter signed by the original owner, or letter, receipt or bill received by the original owner showing an address connecting him with the money or property claimed.
- Successor in Interest {
☐ Copy of document evidencing authority as guardian, executor, administrator, etc.
☐ Copy of Decree of Distribution
☐ Copies of birth & death certificates necessary to trace
- Surviving Spouse/Heir (Estate Probated) {
☐ Copy of Decree of Distribution
☐ Copies of birth & death certificates necessary to trace
- Surviving Spouse/Heir (Estate Not Probated) {
☐ Copies of birth & death certificates necessary to trace
☐ Name widow, widower, all children; and if none, all the other heirs of deceased. List full name, address, age, date of birth-death, and relationship to the original owner.

Name	Address	Relationship	Date of Birth	Date of Death
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(Attach additional sheets if necessary)

4. I/we hereby certify that I/we claim said abandoned property on behalf of myself/ourselves and that I/we will indemnify and save harmless the State of Hawaii, its officers and employees, from any other valid claims to said abandoned property.

State of _____)
_____) SS.
City/County _____)

Subscribed and sworn to before me this _____ day of _____ 19 _____.

Notary Public

(Forward original and duplicate copy to Director of Finance)

FILING INSTRUCTIONS FOR FORM BFF1 (OWNER'S CLAIM FORM)

CLAIM FOR RETURN OF PROPERTY PRESUMED ABANDONED

TO: OWNER/CLAIMANT

In order to expedite any and all claims for the return of property presumed abandoned pursuant to the "Uniform Unclaimed Property Act", Hawaii Revised Statutes Chapter 523A, you are required to complete the "Claim for Return of Property Presumed", Form BFF1, and submit certain supporting documentation when making your claim.

If you are the **original owner** of property presumed abandoned, you must submit, in writing, your name, as it appeared on the bank account when it was opened, or when the instrument (check) was issued. **If your first name or last name has changed since the bank account was opened or instrument was issued, you must submit a copy of the document supporting this change.** If the bank account was opened jointly, both parties must submit a claim for the property presumed abandoned, unless one of the parties is deceased. The survivor must submit a copy of the deceased person's death certificate to support their claim.

If a claim is being made for funds presumed abandoned from a bank account or other financial institution which has been remitted to the State of Hawaii and you do not have the passbook, you must obtain a "Signature Guarantee Card" from that institution. The bank or other financial institution will guarantee to us that your signature is the one which appears on the account, for purposes of making a claim.

If you are an heir, survivor, guardian, executor, administrator, or if you are to receive property under an assignment or transfer, or under a decree of distribution, whether or not a will exists or a probate proceeding occurred, you must submit supporting documentation for the claim. Evidence of an affidavit, birth certificate, or death certificate is required to verify your identity. In case of more than one heir, the names and addresses of all heirs that have a claim against the property presumed abandoned must be furnished. In order to expedite your claim, you should furnish the name of the institution that remitted the property presumed abandoned to the State of Hawaii and year of remittance. **Form BFF1 must be notarized and completed in full before any claim will be processed.**

Form BFF1 and supporting documents must be mailed to:

Director of Finance
State of Hawaii
Department of Budget and Finance
Unclaimed Property Branch
P.O. Box 150
Honolulu, Hawaii 96810-0150

If you should have any questions regarding a claim or the information that must be submitted in proof of your claim, you can call the Unclaimed Property Branch, at (808) 586-1589.